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PTO/SB/01 (12-97)

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Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	JJ-124B-R&D
	First Named Inventor	Michael Francis Dube
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	July 25, 2000
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method of Improving Flavor in Smoking Article

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number TO BE ASSIGNED and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Grover M. Myers	25,359		
August J. Borschke	30,539		
Stephen M. Bodenheimer, Jr.	28,932		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	Grover M. Myers, Esq.				
Address	Law Department - Patents				
Address	R.J. Reynolds Tobacco Company, P.O. Box 1487, 950 Reynolds Blvd.				
City	Winston-Salem	State	NC	ZIP	27102-1487
Country	USA	Telephone	(336) 741-2694	Fax	(336) 741-5449

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname	
Michael Francis		Dube	
Inventor's Signature	<i>Michael Francis Dube</i>		Date
Residence: City	Winston-Salem	State	NC
Country	USA	Citizenship	USA
Post Office Address	130 Northpond Lane		
Post Office Address	Winston-Salem		
City	Winston-Salem	State	NC
ZIP	27106	Country	USA

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Luis Mayan				Dominguez			
Inventor's Signature	<i>Luis Mayan Dominguez</i>					Date	7/20/00
Residence: City	Winston-Salem	State	NC	Country	USA	Citizenship	USA
Post Office Address	230 Lucerne Lane						
Post Office Address	Winston-Salem						
City	Winston-Salem	State	NC	ZIP	27104	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Chi-Kuen				Shu			
Inventor's Signature	<i>Chi-Kuen Shu</i>					Date	7/20/00
Residence: City	Pfafftown	State	NC	Country	USA	Citizenship	USA
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Post Office Address	Pfafftown						
City	Pfafftown	State	NC	ZIP	27040	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Elwood Lee				Williams Jr.			
Inventor's Signature	<i>Elwood Lee Williams Jr.</i>					Date	7-20-00
Residence: City	Lewisville	State	NC	Country	USA	Citizenship	USA
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Post Office Address	Lewisville						
City	Lewisville	State	NC	ZIP	27023	Country	USA

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Kenneth Wayne				Smith			
Inventor's Signature	<i>Kenneth Wayne Smith</i>			Date	07/24/00		
Residence: City	Winston-Salem	State	NC	Country	USA	Citizenship	USA
Post Office Address	253 Creekbend Drive						
Post Office Address	Winston-Salem						
City	Winston-Salem	State	NC	ZIP	27103	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
William Monroe				Coleman III			
Inventor's Signature	<i>William Monroe Coleman III</i>			Date	7/20/00		
Residence: City	Winston-Salem	State	NC	Country	USA	Citizenship	USA
Post Office Address	2900 Loch Drive						
Post Office Address	Winston-Salem						
City	Winston-Salem	State	NC	ZIP	27106	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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